

Children's SIG Youth Sub-Committee Meeting

Monday, October 03, 2005

Members Present

Eve Bleyhl	Leslie Byers	Jonah Deppe
Pat Lopez	David Cygan	Mark DeKraai
Denise Bulling	Renee Dozier	Alice Drake
Ruth Henrichs	Lori Griggs (for Frank Jenson)	Susan Krome
Harriett Lambrecht	Phyllis McCaul	Jill Schubauer
Judith Vohland	Victoria Weisz	Sherri Haber

Teleconferencing Members

Linda Jensen

Deb McCoy

Facilitator: Kate Speck

Guest Speaker: Rich Wiener

A. Presentation by Rich Wiener

1. State Ward Study Proposal Handout: [Please see attached "State Ward Study Proposal.pdf"](#)

What we are trying to accomplish is to understand why children become state wards and to predict the pathways that children follow to become state wards or why some youth don't become state wards.

Data collection will be primarily from the HHS files.

The study will involve trying to estimate the number of children that have mental health problems and become state wards. The study will look at family income and other factors.

Some members observed that middle income families are particularly hard hit when a child has a serious emotional disturbance, not the poor or high income families.

The study will come up with a list of factors that are potential predictors including insurance coverage. The study may involve travel to sites to collect data or make phone calls. The study will probably encompass a year or maybe 2 years. The sample will probably include 800-1000 children.

Discussion on the importance of historical context. It's important to look at what was happening within the state system during the period of study.

Rich indicated that the study could go back 10 years and include sample from each year. We'll need to look at how much data is available and what do the percentages look like. The data is better in recent years

The quality of data has changed over time and is getting better. So, it might be difficult to go back too many years. 1998 was when the current information system came up and quality improved as the years progress. Looking back at 2003 there was a drop in the number of state wards and it is unclear what happened that year. It might be useful to include a qualitative piece that talks about the family, and that includes information that can't just get from the numbers. May not be this study.

One strategy is once we understand predictors we could pick sample perspectives and then do a qualitative analysis to get a sense for what that experience is. One indicator is that only 19 children were identified as becoming state wards to access mental health services. Some found that an odd number. Full count number may not be reflected.

It appears that judges are seeing a bigger issue, so there may be inaccuracy in the data. One option would be to quickly query 39 judges and see if they see.

Rich indicated there will be errors in the study and we won't capture everything, not reality to get everything. The study will only as good as the data file. We will look at relationships.

It may be useful to look at dependency adjudication as no fault of the parent. It would be good to look at how many multiple systems are impacting the youth. Study will provide lots just with the quant piece and then qualitative, Then look at policy change. One of the difficult issues is identifying youth whose parents who could not afford to send kids to treatment. With the lack of treatment, kids engage in status or juvenile offenses (the kid fights, burns down the house, or substance abuse problem) and becomes a state ward.

The study will likely take 18 months; it won't be quick. Condition of data is important. Even with great data it will still take time.

The Youth Sub-committee will not be waiting for 18 months to work. This group will continue to meet and work. **The study will look at substance abuse as well as mental health.**

Rich- will look at family history, SES, and other factors that capture most of the issues. How important is the decision based upon dad, mom, drugs, poverty. It will depend on how able we are to reliably and consistently get data.

We have a limited amount of time and resources. Look at those first and not deviate too far from principal questions. Look at other things later.

But we could look at other states for how they might have implemented solutions. Other states have other solutions, how do they do it.

B. Grid and Logic Model Review

1. Youth Grid:
2. Logic Model:

Denise reviewed the grid. It can be used as a worksheet by committee members to frame the work of the committee with regard to assets, barriers and opportunities related to completing the charge.

Mark reviewed the logic model. This model lays out the structure and outcomes for the entire project.

Recommendation that include quality Assurance as separate column in the table.

One of the things in Medicaid is to increase the number of discharge and treatment plans on file. Also to incorporate values into treatment plan, (e.g., we have met with everyone, here are the goals before discharge). To determine what would one like to see in a treatment plan.

Take one little piece; family centered planning is a philosophy.

The three funding streams are not going to increase.

Discussion about piloting some pieces to see if that takes down the rate and measures the success. We have three months to come up with some strategies.

Could do a pilot in every region. Show that saving X number of dollars on these kids.

Look at those who have already done some of the system of care development, what is working and what is not working. Begin to look at elements.

Info needed:

Systems of Care document

Family Centered Practices

I. Next Meeting

November 7- Bob Freidman and Mario Hernandez will present in the morning. Subcommittees will meet in the afternoon.

October 18- 9:30-1:00 (have lunch brought in)

November 21 – 1:00-4:00

December 12- 1:00-4:00